hemorrhage into the pia mater. In the other form, which often occurs in combination with the first, there are hemorrhages between the dura and the arachnoid. They are often so large that they produce perceptible flattening of the hemisphere, and even cranial asymmetry. Such hemorrhages are found in children who are born asphyxiated, or in those who are born breathing, but in whom the respiration gradually ceases after a few hours or a few days. In the first case, the lung is found in a condition of atelectasis from the very beginning. In the second case, the lung has returned to its fœtal condition of atelectasis. This condition is so characteristic that from the atelectasis existing in children who have breathed we may conclude with certainty that intermeningeal hemorrhage has taken place. This atelectasis is due to the pressure of the extravasation upon the brain.

These conditions are usually found in cases of spontaneous birth. They are of more frequent occurence than has generally been assumed, but do not always end fatally. In regard to the origin of these hemorrhages, the writer holds the following views: The pressure arising during the passage of the head through the pelvis produces a displacement of the parietal bone, and in consequence a compression of the superior longitudinal sinus and its connecting veins, whereby a passive congestion of the convexity of the brain takes place, and, through the tension, a tearing of the veins. Such hemorrhages also occur at other points—for instance, over the cerebellum. They are of similar origin. Probably the very rare hemorrhage into the choroid plexus belongs to the same class. (Cent. f. klin. Med. No. 13, 1891.)

W. M. L.

THERAPEUTICAL.

RESECTION OF THE OPTIC NERVE.

"Medical and Surgical Reporter," February 7, 1891, L. Webster Fox, M.D., writes that if this operation as a substitute for enucleation can be performed with complete protection against sympathetic ophthalmia, it will be a boon to many unfortunates. It is performed as follows: An incision is made in the conjunctiva over the insertion of the external rectus, and two silk threads passed through the muscle near its tendinous insertion. The muscle is cut and drawn to the temple side, exposing the globe. The nerve is brought forward with a hook and cut, the external muscle readjusted. Very little reaction follows, and the action of the muscle is complete. A. F.

HEADACHES OF CHILDHOOD.

"Medical Standard," May, 1891, M. J. Simon, M.D., divides these into the following groups: Headache of growth; from fatigue and mental overstrain; from digestive disorders; from different neuroses; from gouty and rheumatic diathesis; from anæmia and toxic causes; from nasal, naso-pharyngeal, ear and eye disorders and precedent to meningitis. Headaches of growth appear especially in the morning, occupy the frontal and superior vertical region, and are increased by motion. Tonics and rest form the treatment. For the headache in oncoming hysteria he considers hydrotherapy of advantage, but thinks that tonics, and especially iron, are useless. The bromides are inferior as anti-spasmodics to valerian, aconite, antipyrin or phenacetin. The headache of epilepsy is characterized by an abrupt attack accompanied by cerebral torpor. It is for some time an equivalent of the convulsion. The end of the attack results an abundant urination. Early treatment by bromide and belladonna is of the highest importance. Headaches of gouty or rheumatic origin are rare in childhood. They are often accompanied by decided congestive phenomena, and simulate very markedly meningitis. Urinalysis is an excellent diagnostic. A. F.

TREATMENT OF HEADACHES BY NITRO-GLYCERIN.

In the "Medical Age," March 25, 1891, Dr. Trusevich publishes his observations on this subject, the preparation used being a one-per-cent. alcoholic solution. In a very obstinate case, however, the ten-per-cent. solution was used, two drops being first given, and after an interval of two minutes, three more. As a rule, two or three one-drop, or two-drop doses of the one-per-cent. solution placed on the tongue at intervals of a few minutes arrested the headache. He concludes that all cases depending almost entirely on a vaso-constrictor neurosis are immediately curable by nitro-glycerin. A. F.